

Facts About Child Neglect

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Prepared by the DSHS Office of Children's Administration Research (OCAR)

*The likelihood of being referred for **physical neglect** decreases with age, while the likelihood of being referred for **physical abuse** increases with age.*

In spite of increased attention on the part of child protection services, child neglect remains a significant and systemic problem. With improved systems of reporting and documentation, the true extent of child neglect is only recently being recognized. The Office of Children's Administration Research regularly conducts analysis of data found in the Washington State Case and Management Information System (CAMIS). Below we present a number of local and national findings related to child neglect.

- Neglect referrals have increased over time.
- Families referred for neglect have greater re-referral and recurrence rates compared to those referred for physical or sexual abuse.
- Neglect referrals are more likely to receive a low risk tag at intake compared to physical and sexual abuse.
- Physical neglect referrals are more likely to have had prior referrals.

Consequences of Neglect

Children who suffer from neglect face a number of immediate and long term consequences. They are likely to experience delayed physical and mental growth, endure language deficits, and suffer from neurological impairments. They will likely exhibit behavioral problems and poor social skills, suffer from low academic achievement, experience extended poverty or unemployment, and face chronic illnesses or early death.

Risk Factors Associated with Child Neglect

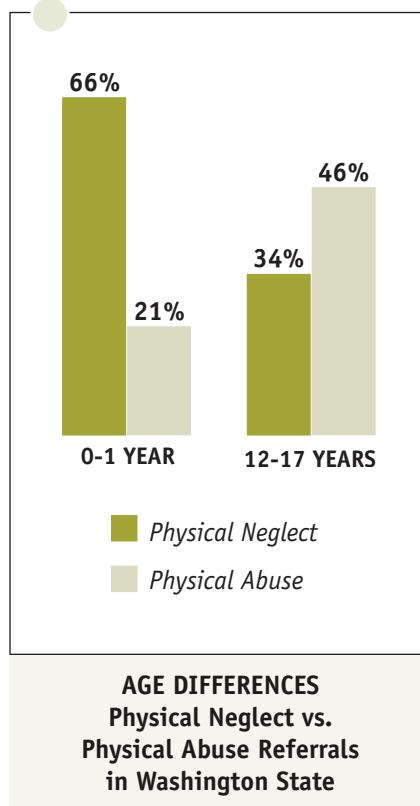
While no single factor predicts or predisposes someone to neglect, research highlights a number of known risk factors associated with child neglect. Generally, intervening with child neglect should be seen as an interactive process involving the characteristics of the family within the socio-economic contexts in which they live. Research on effective interventions for neglecting families indicates that multi-problem, chronic neglect families require multi-service models of intervention.

Historical and Contextual Risk Factors for Neglect

- Previous referrals for neglect.
- Number of children in home.
- Social isolation and stress.
- Unemployment or financial stress.
- Caregiver history of substance abuse.
- Caregiver history of victimization as a child.
- Lack of support services for families

Caretaker and Child Risk Factors for Neglect

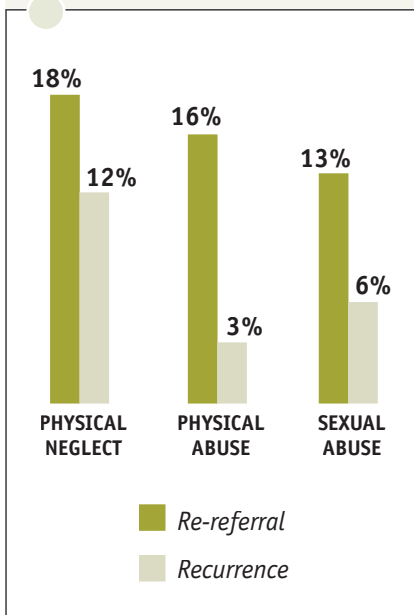
- Poor household management skills.
- Domestic violence.
- Caregiver depression or anxiety.
- Poor parent-child attachment.
- Poor parenting skills.
- Caretaker problem solving deficits.
- Child learning disabilities.



Referrals and Recurrence in WA

- Families referred for neglect have higher re-referral and recurrence rates (18% and 12%) than do families referred for physical abuse (16% and 3%) or sexual abuse (13% and 5 to 6%).
- 64%-67% of all referrals from law enforcement and friends/neighbors concern physical neglect, while 40% of referrals from childcare or educational personnel are for physical neglect.
- Physical neglect referrals are 2% more likely to have had prior referrals compared to referrals for other types of abuse.

**Re-referral & Recurrence Rates*
in Washington State
(1999-2000)**



* **Re-referral:** a second referral, regardless of substantiation

* **Recurrence:** an additional substantiated case made within 6 months of a previously substantiated case.

Risk Tags and Risk Levels in WA

- 25% of physical neglect referrals are given a low risk tag at intake, while 22% of physical abuse and 14% of sexual abuse are given a low risk tag at intake.
- However, for medical neglect an even higher percentage of referrals (28%) have a low risk tag at intake.
- 30% of physical neglect referrals are assigned a risk level of moderate to high in post-investigation assessments, compared to 21% for physical abuse and 20% for sexual abuse.

Effective Interventions and Strategies for Preventing Neglect

- Develop timely and comprehensive assessments.
- Establish small caseloads for social workers.
- Use well trained, well supervised, and well supported social workers.
- Offer treatment for caretaker substance abuse.
- Offer treatment for caretaker depression.
- Develop caretaker parenting skills.
- Offer evidence based behavioral interventions.
- Offer treatment of underlying conditions.
- Provide assistance with social supports.
- Engage families and community in restorative process.

Washington State Trends

- According to WA state DSHS data, from 1988 to 2000, the number of neglect allegations has more than doubled (up 131%), from 17,336 to 40,127.
- WA State data show that physical neglect referrals account for 54% of total referrals, while medical neglect referrals account for another 5%.
- In WA State, from 1997-2000 the neglect allegations have increased while physical and sexual abuse allegations have declined.